

Mississippi State Department of Health
Division of Epidemiology
2002 List of Reportable Diseases and Conditions
Reporting Hotline: 1-800-556-0003 (M-F, 8am-5pm)

To report inside Jackson telephone area or for consultative services
(601) 576 - 7725 (8:00AM - 5:00PM Monday - Friday)

Class I Conditions may be reported nights, weekends and holidays by calling:
(601) 576-7400

Class 1: Diseases of major public health importance which shall be reported directly to the State Department of Health by telephone within 24 hours of first knowledge or suspicion. Class 1 diseases and conditions are dictated by requiring an immediate public health response. Laboratory findings for selected diseases are listed in Section III and Appendix C of the Rules and Regulations Governing Reportable Diseases and Conditions.

Any Suspected Outbreak (including foodborne and waterborne outbreaks)

Anthrax	<i>Haemophilus Influenae</i> type B	Poliomyelitis
Botulism (including foodborne, infant or wound)	Invasive Disease †‡	Rabies (human or animal)
Brucellosis	Hemolytic-uremic syndrome, post-diarrheal	Smallpox
Chancroid	Hepatitis A	Syphilis (including congenital)
Cholera	HIV Infection, including AIDS	Tuberculosis
Creutzfeldt-Jakob Disease, including new variant	Measles	Tularemia
Diphtheria	<i>Neisseria meningitidis</i> Invasive Disease †‡	Typhoid fever
<i>Escherichia coli</i> O157:H7	Pertussis	Varicella Infection, Primary, in patients >15 years of age
Encephalitis (human)	Plague	Yellow fever
		Any unusual disease or manifestation of illness

(possible biological weapon agents appear in bold italics)

Class 2: Diseases or conditions of public health importance of which individual cases shall be reported by mail, telephone or electronically, within 1 week of diagnosis. In outbreaks or other unusual circumstances they shall be reported the same as Class 1. Class 2 diseases and conditions are those for which an immediate public health response is not needed for individual cases.

<i>Chlamydia trachomatis</i> , genital infection	Meningitis other than Meningococcal or <i>H. influenzae</i> type b	Shigellosis
Dengue	Mumps	Spinal Cord Injuries
<i>Enterococcus</i> , invasive infection†, vancomycin resistant	<i>M. tuberculosis</i> infection (positive TST) in children < 16 years of age	<i>Streptococcus pneumoniae</i> , invasive infection, antibiotic resistant ‡
Gonorrhea	Noncholera vibrio disease	<i>Streptococcus pneumoniae</i> , invasive infection in children <5 years of age ‡
Hepatitis (acute, viral only) Note - Hepatitis A requires Class 1 Report	Poisonings (including elevated blood lead levels)	Tetanus
Legionellosis	Psittacosis	Trichinosis
Listeriosis	Rocky Mountain Spotted Fever	Viral Encephalitis in horses and ratices
Lyme Borreliosis	Rubella (including congenital)	
Malaria	Salmonellosis	

† usually presents as meningitis or septicemia, or less commonly as cellulitis, epiglottitis, osteomyelitis, pericarditis or septic arthritis Except for rabies and equine encephalitis, diseases occurring in animals are not required to be reported to the Department of Health.

‡ Specimen obtained from normally sterile site.

Class 3: Laboratory based surveillance. Reported by laboratory only. Diseases or conditions of public health importance of which individual laboratory findings shall be reported by mail, telephone, or electronically within one week of completion of laboratory tests (refer to Section III and Appendix C of the Rules and Regulations Governing Reportable Diseases and Conditions).

Blastomycosis	Hansen's Disease (Leprosy)	Nontuberculous Mycobacterial Disease
Campylobacteriosis	Histoplasmosis	
Cryptosporidiosis		

Class 4 Diseases of public health importance for which immediate reporting is not necessary for surveillance or control efforts. Diseases and conditions in this category shall be reported on a quarterly basis.

All carcinomas, sarcomas, leukemias, and lymphomas are to be reported according to the following ICD-9-CM codes: 140.0 - 208.9, malignant neoplasms, and 230.0 - 234.9, carcinoma in-situ. Basal or squamous cell carcinomas originating in the lip, anus, vulva, vagina, penis or scrotum must be reported.

Carcinoma in-situ of the cervix, 233.1, and basal and squamous cell carcinomas of the skin, 173.0 - 173.9 are excluded from reporting.

Each record shall provide a minimum set of data items which meets the uniform standards recommended for the National Program of Cancer Registries by the North American Association of Central Cancer Registries (NAACCR).

Laboratory Results That Must be Reported to the Mississippi State Department of Health

Laboratories shall report these findings to the Mississippi State Department of Health at least **WEEKLY**. Diseases in bold type shall be reported immediately by telephone. Isolates of organisms marked with a dagger (†) should be sent to the Mississippi State Department of Health Public Health Laboratory. All referring laboratories should call the Public Health Laboratory at (601) 576-7582 prior to shipping any isolate.

Positive Bacterial Cultures or Direct Examinations

Result	Reportable Disease
any bacterial agent in CSF	bacterial meningitis
<i>Bacillus anthracis</i> †	anthrax
<i>Bordetella pertussis</i>	pertussis
<i>Borrelia burgdorferi</i> †	Lyme disease
<i>Brucella</i> species	brucellosis
<i>Campylobacter</i> species	campylobacteriosis
<i>Chlamydia trachomatis</i>	<i>Chlamydia trachomatis</i> genital infection
<i>Clostridium botulinum</i> †	botulism
<i>Clostridium tetani</i>	tetanus
<i>Corynebacterium diphtheriae</i> †	diphtheria
<i>Enterococcus</i> species*	enterococcus infection, invasive vancomycin resistant <i>E coli</i> O157:H7 infection
<i>Escherichia coli</i> O157:H7 †	chancroid
<i>Haemophilus ducreyi</i>	<i>H. influenzae</i> infection, invasive
<i>Haemophilus influenza type b</i> † * (not from throat, sputum)	
<i>Legionella</i> species	legionellosis
<i>Listeria monosytogenes</i>	listeriosis
<i>Mycobacterium</i> species	nontuberculous mycobacterial disease
<i>Mycobacterium tuberculosis</i> †	tuberculosis
<i>Neisseria gonorrhea</i>	gonorrhea
<i>Neisseria meningitidis</i> † * (not from throat, sputum)	meningococcal infection, invasive
<i>Rickettsia rickettsii</i>	Rocky Mountain spotted fever
<i>Salmonella typhi</i> †	typhoid fever
<i>Salmonella</i> species, (Other than <i>S. typhi</i>)	salmonellosis
<i>Francisella tularensis</i>	tularemia
<i>Shigella</i> species	shigellosis
<i>Streptococcus pneumoniae</i> *	pneumococcal infection, invasive in children < 5 <u>or</u> antibiotic resistant
<i>Vibrio cholerae</i> 01 †	cholera
<i>Vibrio</i> species † (other than <i>V. cholerae</i>)	<i>Vibrio</i> infection
<i>Yersinia pestis</i> †	plague

Positive Parasitic Cultures or Direct Examinations

Result	Reportable Disease Condition
any parasite in CSF †	parasitic meningitis
<i>Cryptosporidium parvum</i>	cryptosporidiosis
<i>Plasmodium</i> species†	malaria

Positive Fungal Cultures or Direct Examinations

Result	Reportable Disease Condition
any fungus in CSF	fungal meningitis
<i>Blastomyces dermatitidis</i>	blastomycosis
<i>Histoplasma capsulatum</i>	histoplasmosis

Positive Viral Cultures or Direct Examinations

Result	Reportable Disease Condition
any virus in CSF	viral meningitis
Arboviral agents including but not limited to:	
California encephalitis virus	California encephalitis
Eastern equine encephalomyelitis virus	Eastern equine encephalitis
La Cross encephalitis virus	La Cross encephalitis virus
St. Louis encephalitis virus	St. Louis encephalitis
Western equine encephalomyelitis virus	Western equine encephalitis
West Nile encephalitis virus	West Nile encephalitis
variola virus	smallpox
dengue virus, serotype 1, 2, 3, or 4	dengue
poliovirus, type 1, 2, or 3	poliomyelitis
yellow fever virus	yellow fever

Positive Serologic Tests For:

Abroviral agents including but not limited to:
California encephalitis
Eastern equine encephalitis
La Cross Encephalitis
St. Louis encephalitis
Western equine encephalitis
West Nile encephalitis
brucellosis
cholera
Chlamydia trachomatis genital infection
dengue
hepatitis A (anti-HAV IgM)
hepatitis B (anti-HBc IgM)
HIV infection (refer to Section XIV)
legionellosis ‡
Lyme disease
malaria
measles
mumps
plague
poliomyelitis
psittacosis
Rocky Mountain spotted fever
rubella
syphilis (refer to Section XVII)
smallpox
trichinosis
yellow fever

Positive Blood Chemistries

blood lead levels (venous) of ≥ 10 ug/dl in children less than 16 years of age
blood lead levels (venous) of ≥ 25 ug/dl in those than 16 years of age or older

Surgical Pathology Results

Hansen's disease
human rabies
Creutzfeldt-Jakob Disease, including new variant
Malignant Neoplasms
Mycobacterial Disease including **tuberculosis**
trichinosis

† (See Notes on following page)

* (See Notes on following page)

‡ (See Notes on following page)

Notes

- † Isolates of organism should be sent to the Mississippi State Department of Health Public Health Laboratory. All referring laboratories should call the Public Health Laboratory at (601) 576-7582 prior to shipping any isolate.
- * specimen obtained from a normally sterile site (usually blood or cerebrospinal fluid, or, less commonly, joint, pleural, or pericardial fluid)
- ‡ Serologic confirmation of an acute case of legionellosis can not be based on a single titer. There must be a four-fold rise in titer to $\geq 1:128$ between acute and convalescent specimens.
- § Contact the Mississippi State Department of Health, Division of Epidemiology (601) 576-7725 or the Public Health Laboratory (601) 576-7582 for appropriate tests when considering a diagnosis of botulism.

Updated: July 31, 2003